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Bib Data Sheet

CONFIRMATION NO. 1613

SERIAL NUMBER 10/800,802	FILING DATE 03/15/2004 RULE	CLASS 126	GROUP ART UNIT 3749	ATTORNEY DOCKET NO. ONT-102
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APPLICANTS

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** CONTINUING DATA ***** *None*** FOREIGN APPLICATIONS ***** *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/28/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	<i>Allowance</i> Examiner's Signature <i>[Signature]</i>	CA	15	19	1

ADDRESS

23410
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TITLE

Tray for selectively heating or cooling the contents

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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Other
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